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Waukesha	County DHHS	Appendix O) for contract vear	

Waukesha County DHHS Appendix O for contract year ______
Guide to Determining Room and Board Expense in Substitute Care (Adult Family Home)

Rent, mortgage payments, title insurance, mortgage insurance.		
2. Property and casualty insurance.		
3. Building and/or grounds maintenance of	costs.	
4. Food costs.		
5. Household supplies and equipment.		
6. Furnishings (does not include office fur	rnishings).	
7. Utilities, phones, cable TV, etc.		
8. Property taxes.		
9. Specific individual dietary needs.		
10. Subtotal (total of lines 1-9)		
 Number of persons living in household children). 	d (include all adults and	
12. Divide Line 10 by Line 11. This is the		
expense per individual. (Note: If hous and board charges must be recalculate		
13. Number of days in contract year.		
14. Divide Line 12 by Line 13 to determin rate per individual.	ne the daily Room and Board	
Vendor signature	Date	_